

01-16-01

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01/11/01

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

|                        |                                    |
|------------------------|------------------------------------|
| Attorney Docket No.    | EVC00-003                          |
| First Inventor         | Ian Andrew Bell                    |
| Title                  | Portable Message Waiting Indicator |
| Express Mail Label No. | EL 592 284 477 US                  |

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

## ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

- Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original, and a duplicate for fee processing)*
  - Applicant claims small entity status.  
See 37 CFR 1.27.
  - Specification [Total Pages *(preferred arrangement set forth below)*
    - Descriptive title of the Invention
    - Cross References to Related Applications
    - Statement Regarding Fed sponsored R & D
    - Reference to sequence listing, a table, or a computer program listing appendix
    - Background of the Invention
    - Brief Summary of the Invention
    - Brief Description of the Drawings *(if filed)*
    - Detailed Description
    - Claim(s)
    - Abstract of the Disclosure
  - Drawing(s) (35 U.S.C. 113) [Total Sheets   - Oath or Declaration [Total Pages   - Newly executed (original or copy)
  - Copy from a prior application (37 C.F.R. § 1.63(d))  
*(for continuation/divisional with Box 17 completed)*
    - DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76.

- CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*
- Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
  - Computer Readable Copy (CRF)
  - Specification Sequence Listing on:
    - CD-ROM or CD-R (2 copies); or
    - paper
  - Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS


- Assignment Papers (cover sheet & document(s))
- 37 C.F.R. §3.73(b) Statement  Power of Attorney  
*(when there is an assignee) (Combined with Declaration)*
- English Translation Document *(if applicable)*
- Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations
- Preliminary Amendment
- Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*
- Certified copy of Priority Document(s) *(if foreign priority is claimed)*
- Other: .....Check for \$ 1,340.00.....  
Other: .....Request for Non-Publication (Form PTO/SB/35)

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-in-part (CIP) of prior application No. \_\_\_\_\_ / \_\_\_\_\_ filed \_\_\_\_\_  
Prior application information: Examiner: \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label  or  Correspondence address below

Name: Park & Vaughan LLP *(Insert Customer No. or Attach Bar Code Label here)*

Address: 22200  
PATENT TRADEMARK OFFICE

|         |           |          |
|---------|-----------|----------|
| City    | State     | Zip Code |
| Country | Telephone | Fax      |

|                   |                          |                                   |                  |
|-------------------|--------------------------|-----------------------------------|------------------|
| Name (Print/Type) | Daniel E. Vaughan        | Registration No. (Attorney/Agent) | 42,199           |
| Signature         | <i>Daniel E. Vaughan</i> | Date                              | January 11, 2001 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JC973 U.S. PTO 09/15/01

01/11/01

# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

|                                |  |                   |  |                      |                  |
|--------------------------------|--|-------------------|--|----------------------|------------------|
| <b>TOTAL AMOUNT OF PAYMENT</b> |  | <b>(\$) 1,340</b> |  | Application Number   |                  |
|                                |  |                   |  | Filing Date          | January 11, 2001 |
|                                |  |                   |  | First Named Inventor | Ian Andrew Bell  |
|                                |  |                   |  | Examiner Name        |                  |
|                                |  |                   |  | Group Art Unit       |                  |
|                                |  |                   |  | Attorney Docket No.  | EVC00-003        |

| METHOD OF PAYMENT (check one)  |                        | FEE CALCULATION (continued)  |                        |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
|--|------------------------|--|------------------------|--|------------------------|-----------------|----------|-----|------------|--------------------|-------|-------------------------------------|------------|----------------------------------|-----|-------------------|----|---|------------------------|-----------------|----------|------------------|-----|---------------------------|-----|------------------------|------|--------------------|------|--|-----|-----------------------------------|------|------------------------|------|--|-----|---------------------------------------|-------|-----------------|-------|---|----|--|-----|-----|----|--|---|--|-----|---------------------|-----|---|--|-----------------|-----|-----|-----|--|--|-----|------|-----|-----|---|--|-----|------|-----|-----|--|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|------|-----|------|---|--|-----|-----|-----|----|----------------------------------|--|-----|------|-----|-----|------------------------------------|--|-----|------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|---|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|----|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|---------------------------|--|--|--|--|---------------------|--|-----------------|--|---------------------|--|----------------|--|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:<br>Deposit Account Number: <input type="text" value="50-1003"/><br>Deposit Account Name: <input type="text" value="Park &amp; Vaughan"/><br><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |                        | <b>3. ADDITIONAL FEES</b><br><table border="1"> <thead> <tr> <th>Large Entity Code (\$)</th> <th>Small Entity Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2520</td><td>147</td><td>2520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1840*</td><td>113</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>390</td><td>216</td><td>195</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>890</td><td>217</td><td>445</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1390</td><td>218</td><td>695</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1890</td><td>228</td><td>945</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1510</td><td>138</td><td>1510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1240</td><td>241</td><td>620</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1240</td><td>242</td><td>620</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>440</td><td>243</td><td>220</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>600</td><td>244</td><td>300</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40</td></tr> <tr><td>146</td><td>710</td><td>246</td><td>355</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>710</td><td>249</td><td>355</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>179</td><td>710</td><td>279</td><td>355</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="4">Other fee (specify) _____</td><td></td></tr> <tr> <td colspan="2"><b>SUBTOTAL (1)</b></td> <td colspan="2"><b>(\$) 710</b></td> <td colspan="2"><b>SUBTOTAL (3)</b></td> <td colspan="2"><b>(\$) 40</b></td> </tr> </tbody> </table> |                        | Large Entity Code (\$)   | Small Entity Code (\$) | Fee Description | Fee Paid | 105 | 130        | 205                | 65    | Surcharge - late filing fee or oath |            | 127                              | 50  | 227               | 25 | Surcharge - late provisional filing fee or cover sheet. |                        | 139             | 130      | 139              | 130 | Non-English specification |     | 147                    | 2520 | 147                | 2520 | For filing a request for <i>ex parte</i> reexamination |     | 112                               | 920* | 112                    | 920* | Requesting publication of SIR prior to Examiner action |     | 113                                   | 1840* | 113             | 1840* | Requesting publication of SIR after Examiner action |    | 115  | 110 | 215 | 55 | Extension for reply within first month |   | 116  | 390 | 216                 | 195 | Extension for reply within second month |  | 117             | 890 | 217 | 445 | Extension for reply within third month |  | 118 | 1390 | 218 | 695 | Extension for reply within fourth month |  | 128 | 1890 | 228 | 945 | Extension for reply within fifth month |  | 119 | 310 | 219 | 155 | Notice of Appeal |  | 120 | 310 | 220 | 155 | Filing a brief in support of an appeal |  | 121 | 270 | 221 | 135 | Request for oral hearing |  | 138 | 1510 | 138 | 1510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1240 | 241 | 620 | Petition to revive - unintentional |  | 142 | 1240 | 242 | 620 | Utility issue fee (or reissue) |  | 143 | 440 | 243 | 220 | Design issue fee |  | 144 | 600 | 244 | 300 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Petitions related to provisional applications |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 40 | 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  | <b>SUBTOTAL (1)</b> |  | <b>(\$) 710</b> |  | <b>SUBTOTAL (3)</b> |  | <b>(\$) 40</b> |  |
| Large Entity Code (\$)   | Small Entity Code (\$) | Fee Description  | Fee Paid               |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 105  | 130                    | 205  | 65                     | Surcharge - late filing fee or oath  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 127  | 50                     | 227  | 25                     | Surcharge - late provisional filing fee or cover sheet.                    |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 139  | 130                    | 139  | 130                    | Non-English specification  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 147  | 2520                   | 147  | 2520                   | For filing a request for <i>ex parte</i> reexamination                     |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 112  | 920*                   | 112  | 920*                   | Requesting publication of SIR prior to Examiner action                     |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 113  | 1840*                  | 113  | 1840*                  | Requesting publication of SIR after Examiner action                        |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 115  | 110                    | 215  | 55                     | Extension for reply within first month                                     |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 116  | 390                    | 216  | 195                    | Extension for reply within second month                                    |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 117  | 890                    | 217  | 445                    | Extension for reply within third month                                     |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 118  | 1390                   | 218  | 695                    | Extension for reply within fourth month                                    |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 128  | 1890                   | 228  | 945                    | Extension for reply within fifth month                                     |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 119  | 310                    | 219  | 155                    | Notice of Appeal   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 120  | 310                    | 220  | 155                    | Filing a brief in support of an appeal                                     |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 121  | 270                    | 221  | 135                    | Request for oral hearing   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 138  | 1510                   | 138  | 1510                   | Petition to institute a public use proceeding                              |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 140  | 110                    | 240  | 55                     | Petition to revive - unavoidable   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 141  | 1240                   | 241  | 620                    | Petition to revive - unintentional   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 142  | 1240                   | 242  | 620                    | Utility issue fee (or reissue)   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 143  | 440                    | 243  | 220                    | Design issue fee   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 144  | 600                    | 244  | 300                    | Plant issue fee  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 122  | 130                    | 122  | 130                    | Petitions to the Commissioner  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 123  | 50                     | 123  | 50                     | Petitions related to provisional applications                              |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 126  | 180                    | 126  | 180                    | Submission of Information Disclosure Stmt                                  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 581  | 40                     | 581  | 40                     | Recording each patent assignment per property (times number of properties) | 40                     |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 146  | 710                    | 246  | 355                    | Filing a submission after final rejection (37 CFR 1.129(a))                |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 149  | 710                    | 249  | 355                    | For each additional invention to be examined (37 CFR 1.129(b))             |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 179  | 710                    | 279  | 355                    | Request for Continued Examination (RCE)                                    |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 169  | 900                    | 169  | 900                    | Request for expedited examination of a design application                  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| Other fee (specify) _____  |                        |  |                        |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| <b>SUBTOTAL (1)</b>  |                        | <b>(\$) 710</b>  |                        | <b>SUBTOTAL (3)</b>  |                        | <b>(\$) 40</b>  |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 2. <input checked="" type="checkbox"/> Payment Enclosed:<br><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other   |                        |  |                        |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| <b>1. BASIC FILING FEE</b><br><table border="1"> <thead> <tr> <th>Large Entity Code (\$)</th> <th>Small Entity Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>710</td><td>201</td><td>355</td><td>Utility filing fee</td><td>710</td></tr> <tr><td>106</td><td>320</td><td>206</td><td>160</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>490</td><td>207</td><td>245</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>710</td><td>208</td><td>355</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="4"><b>SUBTOTAL (1)</b></td><td><b>(\$) 710</b></td></tr> </tbody> </table>   |                        | Large Entity Code (\$)   | Small Entity Code (\$) | Fee Description  | Fee Paid               | 101             | 710      | 201 | 355        | Utility filing fee | 710   | 106                                 | 320        | 206                              | 160 | Design filing fee |    | 107   | 490                    | 207             | 245      | Plant filing fee |     | 108                       | 710 | 208                    | 355  | Reissue filing fee |      | 114  | 150 | 214                               | 75   | Provisional filing fee |      | <b>SUBTOTAL (1)</b>                                    |     |                                       |       | <b>(\$) 710</b> |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| Large Entity Code (\$)   | Small Entity Code (\$) | Fee Description  | Fee Paid               |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 101  | 710                    | 201  | 355                    | Utility filing fee   | 710                    |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 106  | 320                    | 206  | 160                    | Design filing fee  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 107  | 490                    | 207  | 245                    | Plant filing fee   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 108  | 710                    | 208  | 355                    | Reissue filing fee   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 114  | 150                    | 214  | 75                     | Provisional filing fee   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| <b>SUBTOTAL (1)</b>  |                        |  |                        | <b>(\$) 710</b>  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| <b>2. EXTRA CLAIM FEES</b><br><table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>35</td><td>-20**=</td><td>15</td><td>X 18 = 270</td></tr> <tr><td>7</td><td>-3**=</td><td>4</td><td>X 80 = 320</td></tr> <tr><td colspan="4">Multiple Dependent _____ = _____</td></tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see below</p> <table border="1"> <thead> <tr> <th>Large Entity Code (\$)</th> <th>Small Entity Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>80</td><td>202</td><td>40</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>270</td><td>204</td><td>135</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>80</td><td>209</td><td>40</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="4"><b>SUBTOTAL (2)</b></td><td><b>(\$) 590</b></td></tr> </tbody> </table> |                        | Total Claims   | Extra Claims           | Fee from below   | Fee Paid               | 35              | -20**=   | 15  | X 18 = 270 | 7                  | -3**= | 4                                   | X 80 = 320 | Multiple Dependent _____ = _____ |     |                   |    | Large Entity Code (\$)                                  | Small Entity Code (\$) | Fee Description | Fee Paid | 103              | 18  | 203                       | 9   | Claims in excess of 20 |      | 102                | 80   | 202  | 40  | Independent claims in excess of 3 |      | 104                    | 270  | 204  | 135 | Multiple dependent claim, if not paid |       | 109             | 80    | 209   | 40 | ** Reissue independent claims over original patent |     | 110 | 18 | 210                                    | 9 | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2)</b> |     |   |  | <b>(\$) 590</b> |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| Total Claims   | Extra Claims           | Fee from below   | Fee Paid               |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 35   | -20**=                 | 15   | X 18 = 270             |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 7  | -3**=                  | 4  | X 80 = 320             |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| Multiple Dependent _____ = _____   |                        |  |                        |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| Large Entity Code (\$)   | Small Entity Code (\$) | Fee Description  | Fee Paid               |  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 103  | 18                     | 203  | 9                      | Claims in excess of 20   |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 102  | 80                     | 202  | 40                     | Independent claims in excess of 3  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 104  | 270                    | 204  | 135                    | Multiple dependent claim, if not paid                                      |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 109  | 80                     | 209  | 40                     | ** Reissue independent claims over original patent                         |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| 110  | 18                     | 210  | 9                      | ** Reissue claims in excess of 20 and over original patent                 |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |
| <b>SUBTOTAL (2)</b>  |                        |  |                        | <b>(\$) 590</b>  |                        |                 |          |     |            |                    |       |                                     |            |                                  |     |                   |    |   |                        |                 |          |                  |     |                           |     |                        |      |                    |      |  |     |                                   |      |                        |      |  |     |                                       |       |                 |       |   |    |  |     |     |    |  |   |  |     |                     |     |   |  |                 |     |     |     |  |  |     |      |     |     |   |  |     |      |     |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |      |     |      |   |  |     |     |     |    |                                  |  |     |      |     |     |                                    |  |     |      |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |   |  |     |     |     |     |   |  |     |    |     |    |  |    |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |                           |  |  |  |  |                     |  |                 |  |                     |  |                |  |

| SUBMITTED BY      |                   |                                   | Complete (if applicable) |           |              |
|-------------------|-------------------|-----------------------------------|--------------------------|-----------|--------------|
| Name (Print/Type) | Daniel E. Vaughan | Registration No. (Attorney/Agent) | 42,199                   | Telephone | 650/474-1973 |
| Signature         |                   | Date                              | January 11, 2001         |           |              |

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|--|------------------------|------------------------------------|-----------------|
| <b>REQUEST AND CERTIFICATION<br/>UNDER<br/>35 U.S.C. 122(b)(2)(B)(i)</b> | First Named Inventor   |                                    | Ian Andrew Bell |
|  | Title                  | Portable Message Waiting Indicator |                 |
|  | Attorney Docket Number |                                    | EVC00-003       |

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

January 11, 2001

Date

*Daniel E. Vaughan*  
Signature

Daniel E. Vaughan

Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant must notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**